

REQUEST FOR CONTINUED EXAMINATION (RCE) TRANSMITTAL

Address to:
Mail Stop RCE
Director of the United States Patent and Trademark Office
P.O. Box 1450
Alexandria, VA 22313-1450

Application Number	10/065,244
Filing Date	September 27, 2002
First Named Inventor	Zaidel, et al
Art Unit	1614
Examiner Name	Shep K. Rose
Attorney Docket Number	2664-000004/US (IR 6963)

This is a Request for Continued Examination (RCE) under 37 CFR 1.114 of the above-identified application. Request for Continued Examination (RCE) practice under 37 CFR 1.114 does not apply to any utility or plant application filed prior to June 8, 1995, or to any design application. See Instruction Sheet for RCEs (not to be submitted to the USPTO) on page 2.

1. Submission required under 37 C.F.R. 1.114

- a. ☐ Previously submitted
- i. ☐ Consider the amendment(s)/reply under 37 C.F.R. 1.116 previously filed on _____
(Any unentered amendment(s) referred to above will be entered).
- ii. ☐ Consider the arguments in the Appeal Brief or Reply Brief previously filed on **JAN 30 2004**
- iii. ☐ Other _____
- b. ☒ Enclosed
- i. ☐ Amendment/Reply
- ii. ☐ Affidavit(s)/Declaration(s)
- iii. ☒ Information Disclosure Statement (IDS)
- iv. ☐ Other _____

2. Miscellaneous

- a. ☐ Suspension of action on the above-identified application is requested under 37 C.F.R. 1.103(c) for a period of _____ months. (Period of suspension shall not exceed 3 months; Fee under 37 C.F.R. 1.17(i) required)
- b. ☐ Other _____

3. Fees

The RCE fee under 37 C.F.R. 1.17(e) is required by 37 C.F.R. 1.114 when the RCE is filed.

- a. ☐ The Director is hereby authorized to charge the following fees, or credit any overpayments, to Deposit Account No. 08-0750
- i. ☐ RCE fee required under 37 C.F.R. 1.17(e)
- ii. ☐ Extension of time fee (37 C.F.R. 1.136 and 1.17)
- iii. ☒ Other Any deficiency for a fee required under 37 CFR 1.16 or 1.17.
- b. ☒ Check in the amount of \$ 900 enclosed, including fee for RCE and Petition Fee
- c. ☐ Payment by credit card (Form PTO-2038 enclosed)

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED

Name (Print /Type)	Donald R. Holland	Registration No. (Attorney/Agent)	35,197
Signature	<i>Donald R. Holland</i>	Date	1/29/04

CERTIFICATE OF MAILING OR TRANSMISSION

I hereby certify that this correspondence is being hand-delivered to: Karen Creasy, Office of Petitions, U.S. Patent and Trademark Office, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below:

Name (Print /Type)	Donald R. Holland <i>STEVE J. HARRIS</i>	Express Mail Label No.	N/A
Signature	<i>[Signature]</i>	Date	1-30-04

02/02/2004 AKELLEY 00000024 1008524

770.00 OP

OE FC:1801

<h1 style="margin: 0;">FEE TRANSMITTAL</h1> <h2 style="margin: 0;">for FY 2004</h2> <p style="font-size: small; margin: 5px 0;">Patent fees are subject to annual revision.</p>		Complete if Known													
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">Application Number</td> <td>10/065,244</td> </tr> <tr> <td>Filing Date</td> <td>September 27, 2002</td> </tr> <tr> <td>First Named Inventor</td> <td>Zaidel, et al.</td> </tr> <tr> <td>Examiner Name</td> <td>Shep K. Rose</td> </tr> <tr> <td>Art Unit</td> <td>1614</td> </tr> <tr> <td>Attorney Docket No.</td> <td>2664-000004/US (IR 6963)</td> </tr> </table>		Application Number	10/065,244	Filing Date	September 27, 2002	First Named Inventor	Zaidel, et al.	Examiner Name	Shep K. Rose	Art Unit	1614	Attorney Docket No.	2664-000004/US (IR 6963)
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TOTAL AMOUNT OF PAYMENT (\$) 900															

<p>METHOD OF PAYMENT (check all that apply)</p> <p> <input checked="" type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None </p> <p> <input type="checkbox"/> Deposit Account: </p> <div style="margin-top: 10px;"> Deposit Account Number: 08-0750 </div> <div style="margin-top: 10px;"> Deposit Account Name: Harness, Dickey & Pierce, P.L.C. </div> <p>The Director is authorized to: (check all that apply)</p> <p> <input type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Credit any overpayments </p> <p> <input checked="" type="checkbox"/> Charge any additional fee(s) during the pendency of this application </p> <p> <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account. </p> <p style="text-align: center;">FEE CALCULATION</p> <div style="border: 1px solid black; padding: 5px; margin-bottom: 10px;"> <p>1. BASIC FILING FEE</p> <table style="width: 100%; font-size: x-small;"> <thead> <tr> <th colspan="2">Large Entity</th> <th colspan="2">Small Entity</th> <th rowspan="2">Fee Description</th> <th rowspan="2">Fee Paid</th> </tr> <tr> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Code</th> <th>Fee (\$)</th> </tr> </thead> <tbody> <tr> <td>1001</td> <td>770</td> <td>2001</td> <td>385</td> <td>Utility filing fee</td> <td></td> </tr> <tr> <td>1002</td> <td>340</td> <td>2002</td> <td>170</td> <td>Design filing fee</td> <td></td> </tr> <tr> <td>1003</td> <td>530</td> <td>2003</td> <td>265</td> <td>Plant filing fee</td> <td></td> </tr> <tr> <td>1004</td> <td>770</td> <td>2004</td> <td>385</td> <td>Reissue filing fee</td> <td></td> </tr> <tr> <td>1005</td> <td>160</td> <td>2005</td> <td>80</td> <td>Provisional filing fee</td> <td></td> </tr> <tr> <td colspan="4">SUBTOTAL (1)</td> <td></td> <td style="border: 1px solid black; text-align: center;">(\$) 0</td> </tr> </tbody> </table> </div> <div style="border: 1px solid black; padding: 5px; margin-bottom: 10px;"> <p>2. EXTRA CLAIM FEES</p> <table style="width: 100%; font-size: x-small;"> <tr> <td>Total Claims</td> <td></td> <td>=</td> <td>Extra Claims</td> <td>0</td> <td>X</td> <td>Fee from below</td> <td></td> <td>=</td> <td>Fee Paid</td> <td>0</td> </tr> <tr> <td>Independent Claims</td> <td></td> <td>=</td> <td>0</td> <td>X</td> <td></td> <td></td> <td>=</td> <td>0</td> <td></td> </tr> <tr> <td>Multiple Dependent</td> <td></td> <td>X</td> <td></td> <td></td> <td></td> <td>=</td> <td>0</td> <td></td> <td></td> </tr> </table> <table style="width: 100%; font-size: x-small; margin-top: 5px;"> <thead> <tr> <th colspan="2">Large Entity</th> <th colspan="2">Small Entity</th> <th rowspan="2">Fee Description</th> <th rowspan="2">Fee Paid</th> </tr> <tr> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Code</th> <th>Fee (\$)</th> </tr> </thead> <tbody> <tr> <td>1202</td> <td>18</td> <td>2202</td> <td>9</td> <td>Claims in excess of 20</td> <td></td> </tr> <tr> <td>1201</td> <td>86</td> <td>2201</td> <td>43</td> <td>Independent claims in excess of 3</td> <td></td> </tr> <tr> <td>1203</td> <td>290</td> <td>2203</td> <td>145</td> <td>Multiple dependent claim, if not paid</td> <td></td> </tr> <tr> <td>1204</td> <td>86</td> <td>2204</td> <td>43</td> <td>** Reissue independent claims over original patent</td> <td></td> </tr> <tr> <td>1205</td> <td>18</td> <td>2205</td> <td>9</td> <td>** Reissue claims in excess of 20 and over original patent</td> <td></td> </tr> <tr> <td colspan="4">SUBTOTAL (2)</td> <td></td> <td style="border: 1px solid black; text-align: center;">(\$) 0</td> </tr> </tbody> </table> <p style="font-size: x-small;">**or number previously paid, if greater; For Reissues, see above</p> </div>	Large Entity		Small Entity		Fee Description	Fee Paid	Fee Code	Fee (\$)	Fee Code	Fee (\$)	1001	770	2001	385	Utility filing fee		1002	340	2002	170	Design filing fee		1003	530	2003	265	Plant filing fee		1004	770	2004	385	Reissue filing fee		1005	160	2005	80	Provisional filing fee		SUBTOTAL (1)					(\$) 0	Total Claims		=	Extra Claims	0	X	Fee from below		=	Fee Paid	0	Independent Claims		=	0	X			=	0		Multiple Dependent		X				=	0			Large Entity		Small Entity		Fee Description	Fee Paid	Fee Code	Fee (\$)	Fee Code	Fee (\$)	1202	18	2202	9	Claims in excess of 20		1201	86	2201	43	Independent claims in excess of 3		1203	290	2203	145	Multiple dependent claim, if not paid		1204	86	2204	43	** Reissue independent claims over original patent		1205	18	2205	9	** Reissue claims in excess of 20 and over original patent		SUBTOTAL (2)					(\$) 0	<p style="text-align: center;">3. 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1807	50	1807	50	Processing fee under 37 CFR 1.17 (q)																																																																																																																																																																																																																																																																																																																						
1806	180	1806	180	Submission of Information Disclosure Stmt																																																																																																																																																																																																																																																																																																																						
8021	40	8021	40	Recording each patent assignment per property (times number of properties)																																																																																																																																																																																																																																																																																																																						
1809	770	2809	385	Filing a submission after final rejection (37 CFR § 1.129(a))																																																																																																																																																																																																																																																																																																																						
1810	770	2810	385	For each additional invention to be examined (37 CFR § 1.129(b))																																																																																																																																																																																																																																																																																																																						
1801	770	2801	385	Request for Continued Examination (RCE)	770																																																																																																																																																																																																																																																																																																																					
1802	900	1802	900	Request for expedited examination of a design application																																																																																																																																																																																																																																																																																																																						
Other fee (specify) <u>Petition to the Commissioner</u>					130																																																																																																																																																																																																																																																																																																																					
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SUBMITTED BY		Complete (if applicable)	
Name (Print/Type)	Donald R. Holland	Registration No. Attorney/Agent)	35,197
Signature		Telephone	314-726-7500
		Date	1/29/04

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